

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>001</b>
Purpose of Expenditure Media placement		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>002</b>
Purpose of Expenditure Media placement		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AR</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Maria Wojciechowski*

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Date

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**02 / 28 / 2016**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>003</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>004</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>GA</b>	
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Maria Wojciechowski

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>		
Mailing Address 1780 West Sequoia Vista Circle			Amount <b>37.23</b>		
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 005		
Purpose of Expenditure Media placement		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>		
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MA</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>1034.36</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Arena Online</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>		
Mailing Address 1780 West Sequoia Vista Circle			Amount <b>37.23</b>		
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 006		
Purpose of Expenditure Media placement		Category/ Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>		
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>1034.36</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>
City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Media placement	Category/ Type <b>004</b>	Transaction ID : <b>007</b> Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OK</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
		MM / DD / YYYY <b>02 / 27 / 2016</b>

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>
City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Media placement	Category/ Type <b>004</b>	Transaction ID : <b>008</b> Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TN</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
		MM / DD / YYYY <b>02 / 27 / 2016</b>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 5 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 009
Purpose of Expenditure Media placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		<b>1034.36</b>	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 010
Purpose of Expenditure Media placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VT</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		<b>1034.36</b>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 6 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 011
Purpose of Expenditure Media placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 012
Purpose of Expenditure Media placement	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 7 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>
City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Media placement	Category/ Type <b>004</b>	Transaction ID : 013 Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>LA</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>
City Salt Lake City	State UT	Zip Code 84104
Purpose of Expenditure Media placement	Category/ Type <b>004</b>	Transaction ID : 014 Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NE</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 8 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Transaction ID : <b>015</b> Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate <b>Hilary Clinton</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>ME</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Transaction ID : <b>016</b> Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate <b>Hilary Clinton</b>		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MI</b>
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 9 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 017
Purpose of Expenditure Media placement	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MS</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		<b>1034.36</b>	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address 1780 West Sequoia Vista Circle		Amount <b>37.23</b>	
City Salt Lake City	State UT	Zip Code 84104	Transaction ID : 018
Purpose of Expenditure Media placement	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>
Name of Federal Candidate Hilary Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		<b>1034.36</b>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 10 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Future45</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>019</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IL</b>	
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Arena Online</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 27 / 2016</b>	
Mailing Address <b>1780 West Sequoia Vista Circle</b>		Amount <b>37.23</b>	
City <b>Salt Lake City</b>	State <b>UT</b>	Zip Code <b>84104</b>	Transaction ID : <b>020</b>
Purpose of Expenditure <b>Media placement</b>	Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 27 / 2016</b>	
Name of Federal Candidate <b>Hilary Clinton</b>		<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MO</b>	
Calendar Year-To-Date Per Election for Office Sought <b>1034.36</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>74.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Maria Wojciechowski

[Electronically Filed]

Date

MM / DD / YYYY  
**02 / 28 / 2016**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 11 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Future45

FEC IDENTIFICATION NUMBER ▼

C C00574533

Check if ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

Arena Online

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
02 27 2016

Mailing Address 1780 West Sequoia Vista Circle

Amount

City

Salt Lake City

State

UT

Zip Code

84104

Purpose of Expenditure

Media placement

Category/  
Type

004

37.23

Transaction ID : 021

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
02 27 2016

Name of Federal Candidate

Hilary Clinton

☐ Support☒ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☒ President☐ Senate

State: NC

Calendar Year-To-Date  
Per Election for Office Sought

1034.36

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶ \_\_\_\_\_

Full Name of Payee

Arena Online

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
02 27 2016

Mailing Address 1780 West Sequoia Vista Circle

Amount

City

Salt Lake City

State

UT

Zip Code

84104

Purpose of Expenditure

Media placement

Category/  
Type

004

37.23

Transaction ID : 022

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
02 27 2016

Name of Federal Candidate

Hilary Clinton

☐ Support☒ Oppose

Office Sought:

☐ House

District: \_\_\_\_\_

☒ President☐ Senate

State: OH

Calendar Year-To-Date  
Per Election for Office Sought

1034.36

Disbursement For: ☒ Primary ☐ General  
2016 ☐ Other (specify) ▶ \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

74.46

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

819.06

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Maria Wojciechowski

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
02 28 2016

Signature